## **Blue Care Network Benefits for State of Michigan Active Employees**

Preventive services	
Health maintenance exam	Covered — \$10 copay
Annual gynecological exam	Covered — \$10 copay
Pap smear screening — laboratory services only	Covered — 100%
Well-baby and well-child care	Covered — \$10 copay
Immunizations	Covered — 100%
Infertility counseling and treatment (excluding in-vitro fertilization)	Covered — \$10 copay
Mammography*	
Mammography screening	Covered — 100%
Physician office services	
Office visits	Covered — \$10 copay
Consulting specialist care — when referred	Covered — \$10 copay
Emergency medical care	
Hospital emergency room — approved diagnosis	Covered — \$50 copay
Physician's office	Covered — \$10 copay
Urgent care center	Covered — \$10 copay or 50% of treatment cost, whichever is less
Ambulance services — when medically necessary	Covered — 100% ground and air
Diagnostic services	
Laboratory and pathology tests	Covered — 100%
Diagnostic tests and X-rays	Covered — 100%
Radiation therapy	Covered — 100%
Maternity services provided by a physician	
Pre-natal and post-natal care	Covered — \$10 copay per visit
Delivery and nursery care	Covered — 100%
Hospital care	
Semi-private room, inpatient physician care, general nursing care, hospital services and supplies	Covered — 100%, unlimited days
Inpatient consultations	Covered — 100%
Chemotherapy	Covered — 100%
Alternatives to hospital care	
Skilled nursing care	Covered — 100%, up to 730 days
Hospice care	Covered — 100% in facility, \$10 office visit for each home visit
Home health care	Covered — 100% in facility, \$10 office visit for each home visit



## Blue Care Network Benefits for State of Michigan Active Employees

Surgical services	
Surgery — includes related	Covered — 100%
surgical services and anesthesia	
Voluntary sterilization	Covered — 100%
Human organ transplants	Covered — 100%, subject to medical criteria
Mental health care and substance a	abuse treatment
Inpatient mental health care and substance abuse care	Covered — 100%, up to 45 days; renewable 60 days after discharge
Outpatient mental health care per calendar year	Covered — 100% for first 20 visits; after 20 visits, \$10 copay for 30-minute visits, \$15 copay for visits longer than 30 minutes
Outpatient substance abuse care	Covered — 100%, up to 35 visits per calendar year
Other services	
Allergy testing and therapy	Covered — 100%
Chiropractic spinal manipulation when referred by PCP	Covered — \$10 copay
Outpatient physical, speech and occupational therapy	Covered — 100%, limited to 60-day treatments/medical episod year, \$10 copay for each visit
Durable medical equipment	Covered — 100%
Prosthetic and orthotic appliances	Covered — 100%
Vision and hearing screenings — when performed in physician's office	Covered — 100%
Prescription drugs — includes contraceptives	\$5 copay for generic prescription drugs/\$10 copay for brand- name prescription drugs (one copay for 90-day supply through mail order)
Deductible, copays and out-of-pock	cet dollar maximums
Deductible	None
Copays	\$10 copay for office visits
Fixed dollar copays	<ul> <li>\$10 copay for urgent care center service</li> </ul>
Tixod dollar dopayo	<ul> <li>\$50 copay for emergency room service</li> </ul>
	<ul> <li>\$5 copay for generic prescription drugs/\$10 copay for brand-name prescription drugs</li> </ul>
Percent copay	None
Copay dollar maximums • Fixed dollar copay	None
Percent copay	None
Dollar maximums	None

## **Questions? Contact Blue Care Network Customer Service at 1-800-662-6667.**

This is intended as an easy-to-read summary. It is not a contract. An official description of benefits is contained in applicable Blue Care Network certificates and riders. Payment amounts are based on the BCN-approved amount, less any applicable deductible and/or copay amounts required by the plan. This coverage is provided pursuant to a contract entered into the State of Michigan and shall be construed under the jurisdiction and according to the laws of the State of Michigan. Services must be provided or arranged by member's primary care physician or health plan.